Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 1 of 50

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Tamieka	
	your government-issued picture identification (for	First name	 First name
	example, your driver's	S	
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Ingram	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8650	

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 2 of 50

Case number (if known)

Debtor 1 Tamieka S Ingram

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		645 River Haven Drive E. Dundee, IL 60118	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Kane	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
ò.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Entered 03/03/17 09:47:38 Page 3 of 50 Case 17-06440 Doc 1 Filed 03/03/17 Desc Main

Document Case number (if known) Debtor 1 Tamieka S Ingram

7.	-							
	The chapter of the Bankruptcy Code you are			rief description of each, see A			C. § 342(b) for Individ	luals Filing for Bankruptcy
	choosing to file under	☐ Chap	oter 7					
		☐ Chap	oter 11					
		☐ Chap	oter 12					
		■ Chap	oter 13					
8.	How you will pay the fee	ab ord	out how yo	entire fee when I file my per u may pay. Typically, if you ar attorney is submitting your par address.	e paying	the fee yourself, y	ou may pay with cas	h, cashier's check, or money
				the fee in installments. If you in Installments (Official Form		e this option, sign	and attach the Applic	cation for Individuals to Pay
				t my fee be waived (You may				
				uired to, waive your fee, and n o your family size and you are				
		ou	t the Applic	cation to Have the Chapter 7 F	iling Fee	Waived (Official F	Form 103B) and file it	with your petition.
9.	Have you filed for bankruptcy within the	□ No.						
	last 8 years?	■ Yes.	District	ND II Ob 40 diamina d	Mhan	404045	Casa number	45 44700
			District	ND IL Ch 13 dismissed	-	12/10/15		15-41736
			District		When		Case number	
			District		vvnen		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
	annate :		Debtor				Relationship to	/OU
			District		When		Case number, if	
			Debtor		-		Relationship to	
			District		When		Case number, if	
11.	Do you rent your residence?	■ No.	Go to li	ne 12.				
		☐ Yes.	Has yo	ur landlord obtained an eviction	n judgm	ent against you an	d do you want to stay	in your residence?
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	About a	n Eviction Judgme	nt Against You (Form	101A) and file it with this

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main

Document Page 4 of 50 Case number (if known) Debtor 1 Tamieka S Ingram Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Part 4: Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Official Form 101

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

Where is the property?

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 5 of 50

Debtor 1 Tamieka S Ingram

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2	(Spouse	Only in a	Joint	Case):
-----------------------	---------	-----------	-------	--------

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 6 of 50

Case number (if known) Debtor 1 Tamieka S Ingram Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative ☐ Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1.000-5.000 25.001-50.000** 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$500,000,001 - \$1 billion **\$0 - \$50,000** □ \$1,000,001 - \$10 million estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$500,000,001 - \$1 billion □ \$0 - \$50,000 □ \$1,000,001 - \$10 million estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Tamieka S Ingram Tamieka S Ingram Signature of Debtor 2 Signature of Debtor 1 Executed on March 3, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 7 of 50

Debtor 1 Tamieka S Ingram Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Edwin	L Feld	Date	March 3, 2017	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Edwin L F	eld			
Printed name				
Edwin L F	eld & Associates, LLC			
Firm name				
1 N LaSall	e Street			
Suite 1225	5			
Chicago, I	L 60602			
	City, State & ZIP Code			
Contact phone	312-263-2100	Email address		
Contact priorie	312-203-2100			
6188070				
Bar number & S	tate			

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main

		Docume	eni Pade 8 di 50	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tamieka S Ingran	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B		28,200.00
	1c. Copy line 63, Total of all property on Schedule A/B		28,200.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	58,583.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	63,122.00
	Your total liabilities	\$	121,705.00
Pai	Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,311.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,901.00
Paı	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose "141 U.S.O. \$ 404(0). Fill out lines 9.0% for statistical purposes 20 U.S.O. \$ 450	a persona	l, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Entered 03/03/17 09:47:38 Filed 03/03/17 Desc Main Case 17-06440 Doc 1 Document

Page 9 of 50 Case number (if known) Debtor 1 Tamieka S Ingram

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$ 2,900.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in		mation to identify you	ır case and this filing:				
	this infor	manon to lacinary you	3				
Debto	r 1	Tamieka S Ingra	nm				
		First Name	Middle Name	Last Name			
Debto	r 2 e, if filing)	First Name	Middle Name	Last Name			
•	, 0,						
Jnited	d States Ba	ankruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS			
200	number						Objects in the least of
Jase	ilullibei _						Check if this is a amended filing
_		orm 106A/B	oortv				
		e A/B: Pro		e. If an asset fits in more than o			12/15
■ N	lo. Go to Pai		le interest in any residence, bui	lding, land, or similar property?			
o yo u	u own, lea ne else dri	ives. If you lease a vehi		icles, whether they are regis le G: Executory Contracts and		any vehic	cles you own that
o you	u own, lea ne else dri rs, vans, tr	se, or have legal or edives. If you lease a vehi	icle, also report it on Schedul	le G: Executory Contracts and		any vehic	cles you own that
Oo you omeo	u own, lea ne else dri rs, vans, tr No 'es	se, or have legal or edives. If you lease a vehing rucks, tractors, sport	cle, also report it on Schedul	le G: Executory Contracts and	d Unexpired Leases. Do not deduct secu	red claims	cles you own that or exemptions. Put aims on Schedule D:
omeo omeo . Car □ N	u own, lea ne else dri s, vans, tr No 'es Make:	se, or have legal or edves. If you lease a vehing rucks, tractors, sport	who has an interes	le G: Executory Contracts and	Do not deduct secuthe amount of any s	red claims secured cla	or exemptions. Put
o you omeo . Car 	u own, lea ne else dri s, vans, tr lo 'es Make: Model: Year:	se, or have legal or edves. If you lease a vehing rucks, tractors, sport Nissan Altima	who has an interes Debtor 1 only Debtor 2 only	le G: Executory Contracts and s st in the property? Check one	Do not deduct secu the amount of any s Creditors Who Have Current value of the	red claims secured cla e Claims S	or exemptions. Put aims on Schedule D: Secured by Property. urrent value of the
omeo omeo . Car □ N	Make: Model: Year: Approximate	se, or have legal or enves. If you lease a vehing rucks, tractors, sport Nissan Altima 2014 te mileage: 2	Who has an interes Debtor 1 only Debtor 2 only Debtor 1 and De	de G: Executory Contracts and s tin the property? Check one	Do not deduct secu the amount of any s Creditors Who Have	red claims secured cla e Claims S	or exemptions. Put aims on Schedule D: Secured by Property.
omeo B. Car □ N ■ Y	Make: Model: Approximat Other inform	se, or have legal or enves. If you lease a vehing rucks, tractors, sport Nissan Altima 2014 te mileage: 2	Who has an interes Debtor 1 only Debtor 2 only Debtor 1 and De	le G: Executory Contracts and s st in the property? Check one	Do not deduct secu the amount of any s Creditors Who Have Current value of the	red claims secured cla e Claims S	or exemptions. Put aims on Schedule D: Secured by Property. urrent value of the
Oo you omeo ∴ Car □ N ■ Y	Make: Model: Year: Approximate	se, or have legal or enves. If you lease a vehing rucks, tractors, sport Nissan Altima 2014 te mileage: 2	Who has an interes Debtor 1 only Debtor 2 only At least one of the	de G: Executory Contracts and s tin the property? Check one	Do not deduct secu the amount of any s Creditors Who Have Current value of the	red claims secured cla e Claims S ne C po	or exemptions. Put aims on Schedule D: Secured by Property. urrent value of the
o you omeo . Car 	Make: Model: Year: Approximat Other inform	se, or have legal or enves. If you lease a vehing rucks, tractors, sport Nissan Altima 2014 te mileage: 2	Who has an interes Who has an interes Debtor 1 only Debtor 2 only A,000 At least one of the case instructions)	de G: Executory Contracts and st in the property? Check one btor 2 only ne debtors and another	Do not deduct secuthe amount of any some Creditors Who Have Current value of the entire property? \$0.	red claims secured claims secured claims some Cope	or exemptions. Put aims on Schedule D: Secured by Property. urrent value of the ortion you own? \$0.0
Oo you omeo	Make: Make: Model: Mother inform Make:	se, or have legal or edives. If you lease a vehice rucks, tractors, sport Nissan Altima 2014 te mileage:	Who has an interes Debtor 1 only Debtor 2 only At least one of the company of th	de G: Executory Contracts and standards in the property? Check one btor 2 only he debtors and another community property	Do not deduct secuthe amount of any some Current value of the entire property? Do not deduct secuthe amount of any some Current value of the entire property?	red claims secured claims Sone Cope	or exemptions. Put aims on Schedule D: Secured by Property. urrent value of the ortion you own?
Car Y	Make: Make: Model: Make: Model: Model: Model:	se, or have legal or edives. If you lease a vehice rucks, tractors, sport Nissan Altima 2014 te mileage: 26 mation:	Who has an interes Debtor 1 and De At least one of the Check if this is (see instructions) Who has an interes Debtor 1 only Debtor 2 only Check if this is (see instructions)	de G: Executory Contracts and standards in the property? Check one btor 2 only he debtors and another community property	Do not deduct secuthe amount of any some Current value of the entire property? Do not deduct secuthe amount of any some Creditors Who Have State Careful to St	red claims secured cl	s or exemptions. Put aims on Schedule D: Secured by Property. urrent value of the ortion you own? \$0.0 s or exemptions. Put aims on Schedule D: Secured by Property.
Oo you omeo	Make: Make: Model: Make: Model: Model: Model:	se, or have legal or enves. If you lease a vehices. If you lease a vehices, tractors, sport Nissan Altima 2014 te mileage: 20 mation: Chevy Impala 2015	Who has an interes Debtor 1 only Debtor 2 only At least one of the company of th	de G: Executory Contracts and st in the property? Check one btor 2 only ne debtors and another community property st in the property? Check one	Do not deduct secuthe amount of any some Current value of the entire property? Do not deduct secuthe amount of any some Current value of the entire property?	red claims secured claims Sone Cipe Colaims Secured claims Secured claims Sone Cipe Colaims Sone	or exemptions. Put aims on Schedule D: Secured by Property. urrent value of the ortion you own? \$0.0
Oo you omeo	Make: Approximate Other inform Make: Model: Year: Model: Year: Model: Year:	se, or have legal or ectives. If you lease a vehice rucks, tractors, sport Nissan Altima 2014 te mileage: 20 mation: Chevy Impala 2015 te mileage: 20	Who has an interes Debtor 1 only Debtor 2 only At least one of the Check if this is (see instructions) Who has an interes Debtor 1 only Debtor 1 and De Check if this is (see instructions) Who has an interes Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and De	de G: Executory Contracts and st in the property? Check one btor 2 only ne debtors and another community property st in the property? Check one	Do not deduct secuthe amount of any some Creditors Who Have Current value of the entire property? Do not deduct secuthe amount of any some Creditors Who Have Current value of the mount of any some Creditors Who Have Current value of the Secuthe Secution Security Security Secution Security Sec	red claims secured claims Sone Cipe Colaims Secured claims Secured claims Sone Cipe Colaims Sone	s or exemptions. Put aims on Schedule D: Secured by Property. urrent value of the ortion you own? \$0.0 s or exemptions. Put aims on Schedule D: Secured by Property. urrent value of the

No

☐ Yes

Entered 03/03/17 09:47:38 Case 17-06440 Doc 1 Filed 03/03/17 Desc Main Document Page 11 of 50 Case number (if known) Debtor 1 Tamieka S Ingram 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$20,000.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Furnishings \$300.00 \$150.00 Furniture (w/lien) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$800.00 3 TV's, computer, misc 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$550.00 Fur coat Clothing & shoews (designer) \$600.00

12. **Jewelry**Example

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

Yes. Describe.....

Jewelry \$200.00

		Case 17-06	6440	Doc 1	Filed 03/03/17 Document	Entered 03/ Page 12 of 5	03/17 09:47:38 0	Desc Main
De	btor 1	Tamieka S Ing	ram		Document		Case number (if known)	
	<i>Examp</i> ■ No	rm animals les: Dogs, cats, bir Describe	ds, hors	es				
14.	Anv oth	ner personal and h	nouseho	old items vo	u did not already list,	including anv health	aids vou did not list	
	■ No	Give specific inform		-	• ,	C ,	·	
15			•		rom Part 3, including		s you have attached	\$2,600.00
Pa	rt 4: Des	cribe Your Financial	l Assets					
Do	you ow	n or have any leg	al or eq	uitable inter	est in any of the follow	wing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No [′]		•		our home, in a safe dep	•	d when you file your petit	ion
							Cash	\$200.00
	Examp □ No				al accounts; certificates counts with the same in Institution	stitution, list each.	credit unions, brokerage	houses, and other similar
			17.1.		Rush De	bit card		\$1,000.00
18.		mutual funds, or les: Bond funds, in	vestmer	nt accounts w	vith brokerage firms, mo	oney market accounts		
	☐ Yes		lr	nstitution or is	ssuer name:			
	•	blicly traded stoc nt venture	k and ir	nterests in ir	ncorporated and uning	corporated business	es, including an intere	st in an LLC, partnership,
	☐ Yes.	Give specific inforr		bout them e of entity:			% of ownership:	
	Negotia Non-ne ■ No	able instruments in	clude pents are the	rsonal check ose you can	r negotiable and non-i ks, cashiers' checks, pro not transfer to someone	omissory notes, and r	noney orders.	
21.		nent or pension ad les: Interests in IR/	ccounts		1(k), 403(b), thrift savin	gs accounts, or other	pension or profit-sharing	plans
	■ No	_ist each account s	separate		Institution		, , , , , , , , , , , , , , , , , , , ,	
	Your sh		deposits	you have ma	ade so that you may co I rent, public utilities (ele		from a company ecommunications compa	nies, or others

Debtor 1	Case 17-06440 Tamieka S Ingram	Doc 1	Filed 03/03/17 Document	Entered 03/03/17 09:47:38 Page 13 of 50 Case number (if known)	Desc Main
_			Institution n	name or individual:	
. 55.			Security of	deposit	\$900.00
				•	
23. Annuit ■ No	ties (A contract for a periodi	c payment of	money to you, either fo	r life or for a number of years)	
☐ Yes.	lssuer name	and descript	ion.		
	ts in an education IRA, in C. §§ 530(b)(1), 529A(b), an		n a qualified ABLE pro	ogram, or under a qualified state tuition pr	ogram.
☐ Yes.	Institution na	ime and desc	ription. Separately file the	ne records of any interests.11 U.S.C. § 521(c)	:
■ No	, equitable or future intere		rty (other than anythin	ng listed in line 1), and rights or powers ex	ercisable for your benefit
26. Patent Examp ■ No	s, copyrights, trademarks ples: Internet domain names Give specific information a	, trade secre s, websites, p			
27. Licens <i>Exam</i> ■ No	ses, franchises, and other	general inta	O .	n holdings, liquor licenses, professional licens	ses
Money or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	funds owed to you Give specific information al	oout them, inc	cluding whether you alre	eady filed the returns and the tax years	
■ No			usal support, child supp	ort, maintenance, divorce settlement, propert	y settlement
Exam _l ■ No	amounts someone owes yoles: Unpaid wages, disabili benefits; unpaid loans Give specific information	ty insurance		nefits, sick pay, vacation pay, workers' compe	ensation, Social Security
31. Interes Examp □ No	sts in insurance policies	,	, and the second	(HSA); credit, homeowner's, or renter's insura	ince
<u> </u>		pany name:	oney and not no value.	Beneficiary:	Surrender or refund value:
	Terr	n policy			\$0.00
			compone who has die		

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

	Document Page 14 of 50	Desc Main
Debt	or 1 Tamieka S Ingram Case number (if known)	
	Yes. Give specific information	
	1 too. Give opeonio information	
	claims against third parties, whether or not you have filed a lawsuit or made a demand for payment	
	Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	No Yes. Describe each claim	
	Yes. Describe each claim	
	other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to	set off claims
	No No	
	Yes. Describe each claim	
35. A	ny financial assets you did not already list	
	No	
Ш	Yes. Give specific information	
36	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached	
50.	for Part 4. Write that number here	\$2,100.00
	L	
Part !	Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. D e	o you own or have any legal or equitable interest in any business-related property?	
_	No. Go to Part 6.	
	Yes. Go to line 38.	
Part (Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.	
rait	If you own or have an interest in farmland, list it in Part 1.	
46 F	to you are have any loved as assistable interest in any form, or commercial fishing related means of	
	o you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ■ No. Go to Part 7.	
	□ No. Go to Fait 7. □ Yes. Go to line 47.	
'	in test. Go to line 47.	
Part 7	Describe All Property You Own or Have an Interest in That You Did Not List Above	
	to you have other property of any kind you did not already list? Examples: Season tickets, country club membership	
	No	
	Yes. Give specific information	
	·	
	Busiss equipment	\$3,500.00
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$3,500.00
Part 8	List the Totals of Each Part of this Form	
55.	Part 1: Total real estate, line 2	\$0.00
	Part 2: Total vehicles, line 5 \$20,000.00	
	Part 3: Total personal and household items, line 15 \$2,600.00 Part 4: Total financial assets, line 36 \$2,100.00	
	Part 4: Total financial assets, line 36 \$2,100.00 Part 5: Total business-related property, line 45 \$0.00	
	Part 6: Total farm- and fishing-related property, line 52 \$0.00	
	Part 7: Total other property not listed, line 54 + \$3,500.00	
62.	Total personal property. Add lines 56 through 61 \$28,200.00 Copy personal property to	tal \$28,200.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62	\$28,200.00
		Ψ±0,200.00

Official Form 106A/B Schedule A/B: Property page 5

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main

			III FAU C 13 UF3U	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Tamieka S Ingran	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				_ 0, ,,,,,,
(if known)				Check if this is an

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	,		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check or	nly one box for each exemption.		
Furnishings Line from Schedule A/B: 6.1	\$300.00	.	\$300.00	735 ILCS 5/12-1001(b)	
Line Horr Schedule A.B. 9.1			0% of fair market value, up to y applicable statutory limit		
3 TV's, computer, misc Line from Schedule A/B: 7.1	\$800.00		\$800.00	735 ILCS 5/12-1001(b)	
Line Horr Schedule A.B. 7.1			0% of fair market value, up to y applicable statutory limit		
Clothing & shoews (designer) Line from Schedule A/B: 11.2	\$600.00		\$600.00	735 ILCS 5/12-1001(b)	
Line Holli Schedule A/B. 11.2			0% of fair market value, up to y applicable statutory limit		
Jewelry Line from Schedule A/B: 12.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)	
Line Holli Schedule A/B. 12.1			0% of fair market value, up to y applicable statutory limit		
Cash Line from Schedule A/B: 16.1	\$200.00	•	\$200.00	735 ILCS 5/12-1001(b)	
Line nom Scriedule Arb. 10.1			0% of fair market value, up to y applicable statutory limit		

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 16 of 50

Taillieka Siliyialli					
Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Rush Debit card Line from Schedule A/B: 17.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
Ellic Holli Golloddic 772. TTT			100% of fair market value, up to any applicable statutory limit		
Term policy Line from Schedule A/B: 31.1	\$0.00		100%	215 ILCS 5/238	
Line nom Schedule AVD. 91.1			100% of fair market value, up to any applicable statutory limit		
Busiss equipment Line from Schedule A/B: 53.1	\$3,500.00		\$1,500.00	735 ILCS 5/12-1001(d)	
Line from Schedule AVD. 33.1			100% of fair market value, up to any applicable statutory limit		
Busiss equipment Line from Schedule A/B: 53.1	\$3,500.00		\$900.00	735 ILCS 5/12-1001(b)	
Line nom Schedule AVB. 33.1			100% of fair market value, up to any applicable statutory limit		
 Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No 			iled on or after the date of adjustme	ent.)	
☐ Yes. Did you acquire the property cove☐ No	ered by the exemption w	ithin 1	,215 days before you filed this case	9?	

Yes

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 17 of 50 Fill in this information to identify your case: Debtor 1 Tamieka S Ingram Middle Name First Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing)

Official Form 106D

Case number (if known)

United States Bankruptcy Court for the:

Schedule D: Creditors Who Have Claims Secured by Property

NORTHERN DISTRICT OF ILLINOIS

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if

- 1. Do any creditors have claims secured by your property?

Part 1: List All Secured Claims		Column A	Column B	Column C
	more than one secured claim, list the creditor separately for particular claim, list the other creditors in Part 2. As much der according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Ally	Describe the property that secures the claim:	\$30,000.00	\$20,000.00	\$10,000.00
Creditor's Name	2015 Chevy Impala 26,000 miles w/lien			
PO Box 9001951 Louisville, KY 40290	As of the date you file, the claim is: Check all that apply.			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or secure car loan)	ed		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
$\hfill\square$ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Date debt was incurred 2015	Last 4 digits of account number			
Nissan Motor Acceptance	Describe the property that secures the claim:	\$26,900.00	\$0.00	\$26,900.00
Creditor's Name	2014 Nissan Altima 24,000 miles w/lien			
	As of the date you file, the claim is: Check all that			
PO Box 660366 Dallas, TX 75266	apply.			
PO Box 660366 Dallas, TX 75266 Number, Street, City, State & Zip Code				
Dallas, TX 75266	apply. ☐ Contingent			
Dallas, TX 75266 Number, Street, City, State & Zip Code	apply. ☐ Contingent ☐ Unliquidated ☐ Disputed	ed		
Dallas, TX 75266 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secure	ed		
Dallas, TX 75266 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secure car loan)	ed		

Date debt was incurred

Last 4 digits of account number

6/18/14

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 18 of 50

Debtor 1	Tamieka S Ingram			Case number (if know)				
ī	First Name I	Middle Name	Last Name	_				
2.3 Prog	ressive Finance L	LC Describe	the property that secures the claim:	\$1,683.00	\$150.00	\$1,533.00		
Credito	or's Name	Furnitu	re (w/lien)					
	West Data Dr per, UT 84020	As of the apply.	date you file, the claim is: Check all the	at				
Numbe	er, Street, City, State & Zip Co	= 0qu						
Who owes	the debt? Check one.	☐ Disput Nature o	ed f lien. Check all that apply.					
■ Debtor 1 □ Debtor 2	- ,	■ An agr car lo	reement you made (such as mortgage c an)	or secured				
Debtor 1	and Debtor 2 only	☐ Statuto	ory lien (such as tax lien, mechanic's lie	n)				
☐ At least of	one of the debtors and an	other 🔲 Judgm	nent lien from a lawsuit					
	this claim relates to a nity debt	Other	(including a right to offset)					
Date debt w	as incurred	La	st 4 digits of account number					
					_			
	-		this page. Write that number here:	\$58,583.00	<u>)</u>			
If this is th	ne last page of your form	n, add the dollar va	alue totals from all pages.	\$58.583.00)			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Eill in 4		Doc	cument	Page 19	of 50		
	his information to identify your ca		2011102111	1 (11)	OI SO		
Debtor ⁻							
Jebioi	First Name	Middle Name		Last Name		_	
ebtor 2	2						
Spouse if	f, filing) First Name	Middle Name		Last Name			
nited (States Bankruptcy Court for the:	NORTHERN DIS	TRICT OF	ILLINOIS			
ase ni	umber						
known)							☐ Check if this is an
							amended filing
<u>fficia</u>	al Form 106E/F						
che	dule E/F: Creditors Wh	no Have Un	secure	d Claims			12/15
as cor	mplete and accurate as possible. Use F	Part 1 for creditors	with PRIORI	ITY claims and Par	2 for creditors with	h NONPRIORITY	Y claims. List the other party t
	nuation Page to this page. If you have if known). List All of Your PRIORITY Uns		eport iii a i e	art, do not me that	art. On the top or a	any additional p	ages, write your name and ca
. Do a	any creditors have priority unsecured o	laims against you	?				
I	No. Go to Part 2.						
	(es						
	List All of Your NONPRIORITY	Unsecured Clai	ms				
	any creditors have nonpriority unsecur						
D0 6	any creations have nonphority unsecui	eu ciainis against					
п.	1 3/ 1 11 11 1 11 11 11	0 1 2 11 1 1			es		
	No. You have nothing to report in this part	. Submit this form to	the court wit	in your other schedu	00.		
	.	. Submit this form to	the court wit	m your other scriedu	00.		
List	.	ns in the alphabetion m. For each claim lis	cal order of t	the creditor who ho what type of claim it	lds each claim. If a is. Do not list claims	already included	in Part 1. If more than one
List	/es. all of your nonpriority unsecured clain n, list the creditor separately for each clain	ns in the alphabetion m. For each claim lis	cal order of t	the creditor who ho what type of claim it	lds each claim. If a is. Do not list claims	already included	in Part 1. If more than one
List claim cred	/es. all of your nonpriority unsecured clain n, list the creditor separately for each clain	ns in the alphabeti m. For each claim lis creditors in Part 3.lf	cal order of t sted, identify you have mo	the creditor who ho what type of claim it	lds each claim. If a is. Do not list claims	already included	I in Part 1. If more than one ntinuation Page of Part 2.
List claim cred	Advocate Christ Medical Cen	ns in the alphabeti m. For each claim lis creditors in Part 3.lf ter Last	cal order of t sted, identify you have mo	the creditor who ho what type of claim it ore than three nonpri ccount number	lds each claim. If a is. Do not list claims	already included	I in Part 1. If more than one ntinuation Page of Part 2. Total claim
List clain cred	Advocate Christ Medical Cen Nonpriority Creditor's Name P.O. Box 4256	ns in the alphabeti m. For each claim lis creditors in Part 3.lf ter Last	cal order of t sted, identify you have mo	the creditor who ho what type of claim it ore than three nonpri	lds each claim. If a is. Do not list claims	already included	I in Part 1. If more than one ntinuation Page of Part 2. Total claim
List clain cred	Advocate Christ Medical Cen Nonpriority Creditor's Name P.O. Box 4256 Carol Stream, IL 60197-4256	ns in the alphabeti m. For each claim lis creditors in Part 3.lf ter Last	cal order of t sted, identify you have mo 4 digits of a n was the de	the creditor who ho what type of claim it ore than three nonpri ccount number ebt incurred?	Ids each claim. If a is. Do not list claims ority unsecured clain	already included	I in Part 1. If more than one ntinuation Page of Part 2. Total claim
List clain cred	Advocate Christ Medical Cen Nonpriority Creditor's Name P.O. Box 4256	ns in the alphabetion. For each claim list creditors in Part 3.lf ter Last Whe As o	cal order of total order of total order of total order of the date you have more as the definition of the date you have of the date you	the creditor who ho what type of claim it ore than three nonpri ccount number	Ids each claim. If a is. Do not list claims ority unsecured clain	already included	I in Part 1. If more than one ntinuation Page of Part 2. Total claim
List clain cred	Advocate Christ Medical Cen Nonpriority Creditor's Name P.O. Box 4256 Carol Stream, IL 60197-4256 Number Street City State Zlp Code Who incurred the debt? Check one.	ns in the alphabetion. For each claim list creditors in Part 3.lf ter Last Whe As o	cal order of t sted, identify you have mo 4 digits of a n was the de	the creditor who ho what type of claim it ore than three nonpri ccount number ebt incurred?	Ids each claim. If a is. Do not list claims ority unsecured clain	already included	I in Part 1. If more than one ntinuation Page of Part 2. Total claim
List clain cred	Advocate Christ Medical Cen Nonpriority Creditor's Name P.O. Box 4256 Carol Stream, IL 60197-4256 Number Street City State Zip Code Who incurred the debt? Check one. Ball of your nonpriority unsecured claim, list the other Advocate Christ Medical Cen Nonpriority Creditor's Name P.O. Box 4256 Carol Stream, IL 60197-4256 Number Street City State Zip Code Who incurred the debt? Check one.	ns in the alphabetic m. For each claim list creditors in Part 3.lf ter Last Whe As o	cal order of total order of total order of total order of the date you have more as the definition of the date you have of the date you	the creditor who ho what type of claim it ore than three nonpri ccount number ebt incurred?	Ids each claim. If a is. Do not list claims ority unsecured clain	already included	I in Part 1. If more than one ntinuation Page of Part 2. Total claim
List clain cred	Advocate Christ Medical Cen Nonpriority Creditor's Name P.O. Box 4256 Carol Stream, IL 60197-4256 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	ns in the alphabetic m. For each claim lis creditors in Part 3.lf ter Last Whe As o	cal order of t sted, identify you have mo 4 digits of a n was the de f the date yo contingent	the creditor who ho what type of claim it ore than three nonpri ccount number ebt incurred?	Ids each claim. If a is. Do not list claims ority unsecured clain	already included	I in Part 1. If more than one ntinuation Page of Part 2. Total claim
List clain cred	Advocate Christ Medical Cen Nonpriority Creditor's Name P.O. Box 4256 Carol Stream, IL 60197-4256 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	ns in the alphabetic m. For each claim lis creditors in Part 3.lf ter Last Whe As o	cal order of total order of the date you contingent inliquidated of NONPRICE.	the creditor who ho what type of claim it ore than three nonpri ccount number ebt incurred?	Ids each claim. If a is. Do not list claims ority unsecured clain	already included	I in Part 1. If more than one ntinuation Page of Part 2. Total claim
List clain cred	Advocate Christ Medical Cen Nonpriority Creditor's Name P.O. Box 4256 Carol Stream, IL 60197-4256 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and anoth	ns in the alphabetic m. For each claim lis creditors in Part 3.lf ter Last Whe As o	cal order of t sted, identify you have mo 4 digits of an n was the de f the date yo contingent Inliquidated	the creditor who ho what type of claim it ore than three nonpri ccount number ebt incurred?	Ids each claim. If a is. Do not list claims ority unsecured clain	already included	I in Part 1. If more than one ntinuation Page of Part 2. Total claim
List claim cred	Advocate Christ Medical Cen Nonpriority Creditor's Name P.O. Box 4256 Carol Stream, IL 60197-4256 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	ns in the alphabetic m. For each claim lis creditors in Part 3.lf ter Last Whe As o U Type ser Sinity debt Cash claim lis creditors in Part 3.lf	cal order of totated, identify you have mode and was the defended of the date you contingent inliquidated of NonPRIC student loans obligations arise	the creditor who how hat type of claim it ore than three nonprince than three nonprince count number ebt incurred? ORITY unsecured countries out of a separary	Ids each claim. If a is. Do not list claims ority unsecured clain	already included ns fill out the Cor	tin Part 1. If more than one national nation Page of Part 2. Total claim \$1,019.0
List claim cred	Advocate Christ Medical Cen Nonpriority Creditor's Name P.O. Box 4256 Carol Stream, IL 60197-4256 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and anoth Check if this claim is for a communication is list the other	ms in the alphabetic m. For each claim lis creditors in Part 3.lf ter Last Whe As o C Type ler S sinity debt C creditors in Part 3.lf	cal order of to teted, identify you have mode of the date you contingent and individual and included the of NONPRICATION of the date of th	the creditor who ho what type of claim it ore than three nonpri ccount number ebt incurred? ou file, the claim is: ORITY unsecured of ising out of a separa	Ids each claim. If a is. Do not list claims ority unsecured claim Check all that apply	already included as fill out the Cor	tin Part 1. If more than one national nation Page of Part 2. Total claim \$1,019.0

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 20 of 50
Case number (if know)

Debit	Tamieka Singiam	Case Humber (II know)	
4.2	Cap One	Last 4 digits of account number	\$905.00
	Nonpriority Creditor's Name PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.3	Cap One	Last 4 digits of account number	\$2,899.00
	Nonpriority Creditor's Name PO Box 30281	When was the debt incurred?	
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.4	CB Carsons	Last 4 digits of account number	\$95.00
	Nonpriority Creditor's Name PO Box 182789	When was the debt incurred?	
	Columbus, OH 43218 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 21 of 50

Debtor 1 Tamieka S Ingram Case number (if know) 4.5 Chgo Dept of Finance Last 4 digits of account number \$200.00 Nonpriority Creditor's Name PO Box 88292 When was the debt incurred? Chicago, IL 60680 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Fines 4.6 **Credit One Bank** Last 4 digits of account number \$510.00 Nonpriority Creditor's Name PO Box 60500 When was the debt incurred? City of Industry, CA 91716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: $\hfill \square$ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.7 **Fedloan** Last 4 digits of account number \$53,565.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 60610 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Student Loan(s) - nondischargeable Other, Specify

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 22 of 50

Debto	I amieka S ingram	Case number (if know)	
4.8	First Premier	Last 4 digits of account number	\$447.00
	Nonpriority Creditor's Name 3820 N. Louise Ave. Sioux Falls, SD 57107-0145	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.9	Peoples Energy	Last 4 digits of account number	\$2,845.00
	Nonpriority Creditor's Name 130 E Randolph Dr, 20th Floor	When was the debt incurred?	
	Chicago, IL 60601 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utility Service	
4.10	Rush Medical Center	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name 600 S. Paulina, Ste 403	When was the debt incurred?	·
	Attn: Humanservices		
	Chicago, IL 60612 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	<u> </u>	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 23 of 50

Debtor	1 Tamieka	a S Ingram		Case r	number (if know	v)	
4.11	US Cellula		Last 4 digits of account number				\$137.00
	Nonpriority Cr Dept 0203		When was the debt incurred?				
-	Palatine, I Number Stree	L 60055 t City State Zlp Code	As of the date you file, the claim	is: Check	all that apply		
		the debt? Check one.	<u></u>				
	Debtor 1 o	nly	Contingent				
	Debtor 2 o	inly	Unliquidated				
Debtor 1 and Debtor 2 only			Disputed				
	_	ne of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
	_		☐ Student loans				
		his claim is for a community debt subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration ag	reement or divo	orce that you did not	
	■ No	adject to onset.	Debts to pension or profit-shari	ina nlane a	and other simila	ur dehte	
				ing plans, t	and other simila	ii debis	
	☐ Yes		Other. Specify Services				
Part 3:	List Othe	ers to Be Notified About a Deb	t That You Already Listed				
trying more t	to collect fron han one cred	n you for a debt you owe to someo	out your bankruptcy, for a debt that y ne else, list the original creditor in P ted in Parts 1 or 2, list the additional page.	arts 1 or 2	, then list the o	collection agency here. Simil	arly, if you have
	nd Address		on which entry in Part 1 or Part 2 did yo		•		
	I Scott Har	•	ine <u>4.5</u> of (<i>Check one</i>):	☐ Part 1:	Creditors with F	Priority Unsecured Claims	
	Jackson E go, IL 6060	Blvd, Suite 600		Part 2:	Creditors with N	Nonpriority Unsecured Claims	
Ornicas	j 0, i∟ 0000		ast 4 digits of account number				
Name an	nd Address	C	on which entry in Part 1 or Part 2 did yo	u list the o	riginal creditor?		
Rush I	Hospital	L	ne 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
	V Van Bure						
Cnicaç	go, IL 6061		ast 4 digits of account number				
	_						
Part 4:		Amounts for Each Type of Uns					
	he amounts o ecured claim.		s. This information is for statistical r	eporting p	ourposes only.	28 U.S.C. §159. Add the amo	unts for each type
					Т	otal Claim	
	6a	a. Domestic support obligations		6a.	\$	0.00	
Total cla		. Taxes and certain other debts y	you owe the government	6b.	\$	0.00	
	60		-	6c.	\$	0.00	
	60	-	cured claims. Write that amount here.	6d.	\$	0.00	
	66	e. Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	0.00	
	C.f	Student leans		Cf.		otal Claim	
Total cla	6f. aims	Student loans		6f.	\$	0.00	
from Pa			paration agreement or divorce that ye	ou ea	\$	0.00	
	6h	did not report as priority claims Debts to pension or profit-shar	s ing plans, and other similar debts	6g. 6h.	\$ 	0.00	
	6i.		nsecured claims. Write that amount he		\$	63,122.00	
		· •					
	6j.	Total Nonpriority. Add lines 6f th	nrough 6i.	6j.	\$	63,122.00	

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main

Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Tamieka S Ingrar	n					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number							
(if known)							

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 River Haven Place
251 River Haven Place
Dundee, IL 60118

State what the contract or lease is for
Debtor is tenant (1 yr lease to 2/23/18)

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 25 of 50

		DOCUME	<u>III Paue 25 i</u>	JI (DU)	
Fill in this i	nformation to identify your				
Debtor 1	Tamieka S Ingran	n			
D 1 ()	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	j) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	er				
(if known)					☐ Check if this is an amended filing
Official	Form 106H				
	ule H: Your Cod	ebtors			12/15
our name a	d number the entries in the and case number (if known) ou have any codebtors? (If	. Answer every question	•		any Additional Pages, write
■ No □ Yes					
Arizona _	in the last 8 years, have you , California, Idaho, Louisiana,				tes and territories include
	Go to line 3. Did your spouse, former sport	use, or legal equivalent live	e with you at the time?		
in line : Form 1 fill out	2 again as a codebtor only i 06D), Schedule E/F (Official Column 2. column 1: Your codebtor	f that person is a guaran I Form 106E/F), or Sched	ntor or cosigner. Make	e sure you have listed the co 06G). Use Schedule D, Sch Column 2: The creditor	th you. List the person shown reditor on Schedule D (Officia edule E/F, or Schedule G to r to whom you owe the debt
Na	ame, Number, Street, City, State and Zi	P Code		Check all schedules that	at apply:
3.1				☐ Schedule D, line	
N	ame			Schedule E/F, line	
				☐ Schedule G, line _	
	umber Street ity	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	ame			☐ Schedule E/F, line ☐ Schedule G, line _	
N	umber Street			_	
С	ity	State	ZIP Code		

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 26 of 50

Fill	in this information to identify you	r case:				1			
	btor 1 Tamieka S								
	btor 2 buse, if filing)								
Uni	ited States Bankruptcy Court for t	he: NORTHERN DISTRI	CT OF ILLINOIS						
	se number 		-			Check if this is: An amende A suppleme	ent showin	ng postpetition	
0	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your Inc	come							12/15
spo atta	plying correct information. If you are separated and you are separated and you a separate sheet to this form The separate sheet to	our spouse is not filing w n. On the top of any addit	rith you, do not incluing ith you, do not incluing ith you are not incluing it	ıde info	mat	on about your spo d case number (if	ouse. If m known). <i>i</i>	nore space is Answer every	needed,
	information.		Debtor 1					iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed			☐ Emplo			
	employers.	Occupation	Hairstylist						
	Include part-time, seasonal, or self-employed work.	Employer's name	Fashioable Add	liction					
	Occupation may include studer or homemaker, if it applies.	Employer's address	130 W Madison Oak Park, IL 60						
		How long employed t	here? 1 yr						
Par	rt 2: Give Details About M	onthly Income							
spou If yo	mate monthly income as of the use unless you are separated. bu or your non-filing spouse have e space, attach a separate sheet	more than one employer, c	,	·	,	, ,	·	,	J
						For Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly over	ertime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add	l line 2 + line 3.		4.	\$	0.00	\$	N/A	

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 27 of 50

Debt	tor 1	Tamieka S Ingram	_	Case	number (if known)			
	Con	y line 4 here	4.	For	r Debtor 1		ebtor 2 or ling spouse N/A	
_	•			· –				
5.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food stamps Pension or retirement income Other monthly income. Specify: Average income Contribution from father Contribution from child's father	8c. 8d. 8e.	\$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 2,000.00 400.00	\$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,311.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,311.00 + \$_		N/A = \$3	3,311.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedulude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ur depen		•		hedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Centies					12. \$3	3,311.00
13.	Do y	/ou expect an increase or decrease within the year after you file this form	n?				Combine monthly	
		No.						

Fill	in this information to identify yo	ur case:					
Deb	otor 1 Tamieka S In	gram			Chec	k if this is:	
	otor 2 ouse, if filing)						wing postpetition chapter the following date:
``		NODE	IEDN DIOTDIOT OF ILLINI	010	_	<u> </u>	
Unit	ted States Bankruptcy Court for the:	NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	se number nown)						
0	fficial Form 106J						
	chedule J: Your E						12/15
info	as complete and accurate as ormation. If more space is neamber (if known). Answer ever	eded, atta	ch another sheet to this				
Par	Describe Your House Is this a joint case?	hold					
''	■ No. Go to line 2. □ Yes. Does Debtor 2 live i	n a sonar	ate household?				
	□ No		ial Form 106J-2, <i>Expense</i> :	s for Separate Hous	<i>ehold</i> of Deb	tor 2.	
2.	Do you have dependents?	□ No					
	Do not list Debtor 1 and Debtor 2.	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.			Daughter		5	Yes
				Daughter		13	□ No ■ Yes
							□ No
							Yes
							□ No □ Yes
3.	Do your expenses include expenses of people other the yourself and your dependent	nan $_{\square}$	No Yes				□ res
Est	t 2: Estimate Your Ongoir timate your expenses as of your expenses as of your expenses as of a date after the bolicable date.	ur bankr	uptcy filing date unless y	rou are using this f plemental <i>Schedul</i> e	orm as a su e <i>J</i> , check th	pplement in a Cha e box at the top o	apter 13 case to report of the form and fill in the
the	lude expenses paid for with r value of such assistance and ficial Form 106l.)					Your expo	enses
4.	The rental or home ownersi payments and any rent for the			nclude first mortgag	je 4. \$		542.00
	If not included in line 4:						
	4a. Real estate taxes				4a. \$		0.00
	4b. Property, homeowner's	, or renter	's insurance		4a. \$		0.00
	4c. Home maintenance, re				4c. \$		20.00
_	4d. Homeowner's associati				4d. \$		0.00
5.	Additional mortgage payme	nts for yo	our residence, such as ho	me equity loans	5. \$		0.00

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 29 of 50

Tamieka S Ingram	Ca	ase num	per (if known)	
tilities:				
		6a	\$	160.00
e de la companya de				30.00
				110.00
· · · · · · · · · · · · · · · · · · ·				0.00
		_		775.00
			*	340.00
			•	140.00
				65.00
•		11.	>	120.00
		12.	\$	455.00
	noks			2.00
	OOKS			0.00
_		14.	Ψ	0.00
	4 or 20			
	T 01 20.	15a	\$	42.00
			· -	0.00
				100.00
· ·	4 00	_ 150.	>	0.00
	es 4 or 20.	16	¢	0.00
		_ 10.	Φ	0.00
		170	¢	0.00
• •			·	
• •			·	0.00
		_		0.00
		_ 17d.	\$	0.00
		10	¢	0.00
		10.		
	you.	40	\$	0.00
	orm or on Sched			
				0.00
			· —	0.00
· · ·		20c.	\$	0.00
0d. Maintenance, repair, and upkeep expenses		20d.	\$	0.00
0e. Homeowner's association or condominium dues		20e.	\$	0.00
ther: Specify:		21.	+\$	0.00
· · ·		_		
9				2,901.00
	al Form 106J-2		\$	
2c. Add line 22a and 22b. The result is your monthly expenses.			\$	2,901.00
				, -
		0.5		
, ,			·	3,311.00
3b. Copy your monthly expenses from line 22c above.		23b.	-\$	2,901.00
3c. Subtract your monthly expenses from your monthly income.		230	\$	410 00
3c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .		23c.	\$	410.00
The result is your monthly net income.	ho voor offer voor			410.00
The result is your <i>monthly net income</i> . To you expect an increase or decrease in your expenses within t		file this	form?	
The result is your <i>monthly net income</i> . To you expect an increase or decrease in your expenses within to example, do you expect to finish paying for your car loan within the year or do		file this	form?	
The result is your <i>monthly net income</i> . To you expect an increase or decrease in your expenses within t		file this	form?	
Itabed of the element seeds 555 april 777 cert pit 00000 triac 2 2 2 3	illities: i. Electricity, heat, natural gas i. Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services i. Other. Specify: cod and housekeeping supplies inilidcare and children's education costs othing, laundry, and dry cleaning ersonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. o not include car payments. Intertainment, clubs, recreation, newspapers, magazines, and be naritable contributions and religious donations surance. In the latth insurance deducted from your pay or included in lines and the lines	illities: a. Electricity, heat, natural gas b. Water, sewer, garbage collection c. Telephone, cell phone, Internet, satellite, and cable services d. Other. Specify: bod and housekeeping supplies nildcare and children's education costs othing, laundry, and dry cleaning gresonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. b not include car payments. b tertainment, clubs, recreation, newspapers, magazines, and books naritable contributions and religious donations surance. b not include insurance deducted from your pay or included in lines 4 or 20. ia. Life insurance ib. Health insurance id. Other insurance. Specify: ixes. Do not include taxes deducted from your pay or included in lines 4 or 20. becify: stallment or lease payments: ia. Car payments for Vehicle 1 ib. Car payments for Vehicle 2 co. Other. Specify: bur payments of alimony, maintenance, and support that you did not report as educted from your pay on line 5, Schedule I, Your Income (Official Form 106I). ther payments you make to support others who do not live with you. becify: ther payments you make to support others who do not live with you. becify: d. Other. Specify: bur payments of alimony, maintenance, and support that you did not report as educted from your pay on line 5, Schedule I, Your Income (Official Form 106I). ther payments you make to support others who do not live with you. becify: d. Aliment of the property expenses not included in lines 4 or 5 of this form or on Schedula. Montgages on other property b. Real estate taxes c. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses de. Homeowner's association or condominium dues ther: Specify: alculate your monthly expenses for Debtor 2), if any, from Official Form 106J-2 the Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 the Copy line 22 (monthly expenses for Debtor 2), if pay, from Official Form 106J-2 the Copy line 12 (your comb	illities: I. Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services I. Other. Specify: 6d. Other. Specify: 6d. Indicare and children's education costs othing, laundry, and dry cleaning orsonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. In or include car payments. Intertainment, clubs, recreation, newspapers, magazines, and books anaritable contributions and religious donations I. Life insurance. In the lath insurance deducted from your pay or included in lines 4 or 20. Inc. Include insurance deducted from your pay or included in lines 4 or 20. Inc. Inc. Inc. Inc. Inc. Inc. Inc. Inc	illities: I. Electricity, heat, natural gas D. Water, sewer, garbage collection Electrone, cell phone, Internet, satellite, and cable services E. Telephone, cell phone, Internet, satellite, and cable services D. Other. Specify: Other. Specify: Other. Specify: Other. Specify: Other. Specify: Othing, laundry, and dry cleaning Fersonal care products and services In thing, laundry, and dry cleaning Fersonal care products and services In the services

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 30 of 50

Fill in this infor	mation to identify your	case:			
Debtor 1	Tamieka S Ingran				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is a amended filing	an
f two married performance file this bottaining money	eople are filing togethers form whenever you fi	n connection with a bank	nsible for supplying cor		
Sigr	n Below				
Did you pay	y or agree to pay some	one who is NOT an attor	ney to help you fill out b	bankruptcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bankruptcy Petition Preparer's Declaration, and Signature (Official Fo	
	Ity of perjury, I declare e true and correct.	that I have read the sum	mary and schedules file	ed with this declaration and	
X /s/ Tam	nieka S Ingram		X		
Tamiel	ka S Ingram re of Debtor 1		Signature of	Debtor 2	
Date N	March 3, 2017		Date		

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 31 of 50

E	in this inform	nation to identify you				
		nation to identify you				
Dec	otor 1	Tamieka S Ingra	Middle Name	Last Name		
	otor 2		ACT III AL			
` `	use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Cas (if kn	se number				-	Check if this is an mended filing
Sta		of Financial	Affairs for Individ			4/16
info	rmation. If m	ore space is needed n). Answer every que	, attach a separate sheet to	this form. On the top of an	e equally responsible for sup y additional pages, write yo	
	•			Liveu Deloie		
1.	wnat is you	current marital statu	JS?			
	☐ Married					
	■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. Lis	t all of the places you	lived in the last 3 years. Do no	ot include where you live nov	V.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
	110 S Ham Chicago, I		From-To: 1997 - 2017	☐ Same as Debtor 1	I	☐ Same as Debtor 1 From-To:
state	■ No □ Yes. Ma	es include Arizona, Ca	alifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	nity property state or territor lico, Texas, Washington and N	
Par	t 2 Explai	n the Sources of You	ır Income			
4.	Fill in the total	al amount of income yo	mployment or from operating ou received from all jobs and a have income that you received.	all businesses, including par		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$4,000.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main

Document Page 32 of 50 ase number (if known) Debtor 1 Tamieka S Ingram **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$13,000.00 □ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$13,700.00 ■ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 **Gross income from** Sources of income **Gross income** Sources of income Describe below. Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? \square No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

Creditor's Name and Address

Dates of payment

Total amount
paid

Amount you
still owe

Was this payment for ...

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to

No.

□ Yes

Go to line 7.

an attorney for this bankruptcy case.

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 33 of 50 Case number (if known)

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a d	ebt that benefited an
	No No					
	Yes. List all payments to an insider				_	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	 Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. 					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupton Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, fo	preclosed, garnis	hed, attached	d, seized, or levied? Value of the property
		Explain what happened	d			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		luding a bank or fin	ancial institutior	n, set off any	amounts from your
	Creditor Name and Address	Describe the action the	creditor took		action was	Amount
	 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes 					
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value	of more than \$60	00 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave fts	Value
	Person to Whom You Gave the Gift and Address:					

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 34 of 50 Case number (if known) Debtor 1 Tamieka S Ingram 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Edwin L Feld & Associates, LLC Attorney Fees \$4000.00; \$200.00 paid 2/26/17 \$200.00 1 N LaSalle Street prepetition **Suite 1225** Chicago, IL 60602 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Description and value of any property **Person Who Was Paid** Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.
Person Who Received Transfer

Person's relationship to you

Nο

Address

Official Form 107

Describe any property or

paid in exchange

payments received or debts

Description and value of

property transferred

Date transfer was

made

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 35 of 50 Case number (if known) Debtor 1 Tamieka S Ingram 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred **Bank of America** XXXX-6/16 \$0.00 Checking PO Box 851001 □ Savings Dallas, TX 75285 ■ Money Market □ Brokerage □ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Do you still Name of Financial Institution Who else had access to it? Describe the contents have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) have it? Address (Number, Street, City, State and ZIP Code Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details.

Owner's Name

Where is the property?

Code)

(Number, Street, City, State and ZIP

Describe the property

Value

Address (Number, Street, City, State and ZIP Code)

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Page 36 of 50 Case number (if known) Document

Debtor 1 Tamieka S Ingram

Part 10: Give Details About Environmental Information

r the nurnose of Part 10, the following definitions annly:

FOI	the purpose of Fart 10, the following definitions	арріу.					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	law, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	n they occurred.				
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environm	nental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admini	strative proceeding under any envi	ironmental law? Include settlements	and orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Pa	t 11: Give Details About Your Business or Con	nections to Any Business					

27.	. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?				
	☐ A sole proprietor or self-employed	in a trade, profession, or other activity, eith	ner full-time or part-time		
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)				
☐ A partner in a partnership					
☐ An officer, director, or managing executive of a corporation					
☐ An owner of at least 5% of the voting or equity securities of a corporation					
	☐ No. None of the above applies. Go to	Part 12.			
	Yes. Check all that apply above and fi	II in the details below for each business.			
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.		
			Dates business existed		
	Fierce Hair 130 W Madison	Hairstylist	EIN:		

Oak Park, IL 60302

From-To 2013 - to Date

Document Page 37 of 50 Debtor 1 Tamieka S Ingram Case number (if known) 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Tamieka S Ingram Signature of Debtor 2 Tamieka S Ingram Signature of Debtor 1 Date March 3, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Entered 03/03/17 09:47:38

Desc Main

Case 17-06440

Doc 1

Filed 03/03/17

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Cha	pter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Monies paid for prepetition services needed to limit the financial burden of the firm.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$200.00

toward the flat fee, leaving a balance due of \$3,800.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00.

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: March 3, 2017	II J
Signed:	
/s/ Tamieka S Ingram	/s/ Edwin L Feld
Tamieka S Ingram	Edwin L Feld 6188070
	Attorney for the Debtor(s)
Debtor(s)	
Do not sign this agreement if the amo	ounts are blank.

Local Bankruptcy Form 23c

Case 17-06440 Doc 1 Filed 03/03/17 Entered 03/03/17 09:47:38 Desc Main Document Page 48 of 50

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Tamieka S Ingram		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	NEY FOR DE	CBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	or agreed to be paid	to me, for services rendered	or to	
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received	l .	s	200.00	
	Balance Due		\$	3,800.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. l	I have not agreed to share the above-disclosed com	npensation with any other person	unless they are mem	pers and associates of my law	/ firm.
ļ	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the name of th				. A
5.]	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	of the bankruptcy c	ase, including:	
t c	 Analysis of the debtor's financial situation, and reno Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credi [Other provisions as needed] 	atement of affairs and plan which	may be required;		
6. I	By agreement with the debtor(s), the above-disclosed f	ee does not include the following	service:		
		CERTIFICATION			
I this ba	certify that the foregoing is a complete statement of a ankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	presentation of the debtor(s)	in
М	arch 3, 2017	/s/ Edwin L Feld			
De	ate	Edwin L Feld 6186 Signature of Attorne Edwin L Feld & As 1 N LaSalle Street Suite 1225 Chicago, IL 60602	y ssociates, LLC		
		312-263-2100 Fax Name of law firm			

Advocate Christ Medical Center P.O. Box 4256 Carol Stream, IL 60197-4256

Ally PO Box 9001951 Louisville, KY 40290

Arnold Scott Harris, PC 111 W Jackson Blvd, Suite 600 Chicago, IL 60604

Cap One PO Box 30281 Salt Lake City, UT 84130

CB Carsons PO Box 182789 Columbus, OH 43218

Chgo Dept of Finance PO Box 88292 Chicago, IL 60680

Credit One Bank PO Box 60500 City of Industry, CA 91716

Fedloan PO Box 60610 Harrisburg, PA 17106

First Premier 3820 N. Louise Ave. Sioux Falls, SD 57107-0145

Nissan Motor Acceptance PO Box 660366 Dallas, TX 75266

Peoples Energy 130 E Randolph Dr, 20th Floor Chicago, IL 60601 Progressive Finance LLC 256 West Data Dr Draper, UT 84020

Rush Hospital 1700 W Van Buren #161 Chicago, IL 60612

Rush Medical Center 600 S. Paulina, Ste 403 Attn: Humanservices Chicago, IL 60612

US Cellular Dept 0203 Palatine, IL 60055